

SHARECARE RELEASE NOTES

Version 9.0.2

INTRODUCTION

ShareCare version 9.0.2 contains improvements and some minor bug fixes. The focus of this release includes new screens and updates to existing screens for Phase II of the HIPAA 274 (Provider Directory) Implementation so counties may begin entering and updated the required submission data. The new and updated screens are detailed in the Statement of Work section below.

SAAS CUSTOMERS

Echo support will contact you to determine the best time to install this version.

SELF-HOSTED CUSTOMERS

Do not install this version until 9.0.1 has been installed.

IT IS HIGHLY RECOMMENDED THAT YOU PERFORM AND VERIFY A FULL DATABASE BACKUP PRIOR TO INSTALLING ANY UPGRADES, ENSURING THAT YOUR DATABASE CAN BE RESTORED IF NEEDED.

Please note that users will be unable to access ShareCare while the version is being installed. If you have any questions about this process or items requiring Administration, please contact Echo Technical Support at (510) 238-2727 or email support@echoman.com.

STATEMENT OF WORK

Overview - HIPAA 274 (Provider Directory) Implementation – Phase II

The California Department of Health Care Services is implementing a Health Care Provider Directory (HIPAA X-12 274 Transaction set) requiring counties to replace the current NACT reporting format with the new 274 submission format in the Fall of 2021. The following sections detail the new screens, enhancements completed to date and required configuration in ShareCare version 9.0.2 for Phase II for compliance with the HIPAA 274 requirements.

The hierarchical data structure for the 274 submission is *Provider Group* → *Site* → *Service Provider*. In the ShareCare MHS/ADP Systems of Care, the equivalent is *Entity* → *Facility* → *Service Provider*. Users can make submission decisions at all three levels by selecting the **Yes/No** radio button labeled **Include in 274**. For example,

- If an Entity's **Include in 274** field is set to *No*, none of its Facilities or Service Providers are submitted, regardless of their own **Include in 274** setting.
- If an Entity has three Facilities, A, B, and C, the user may decide to check **Yes** in the **Include in 274** for the Entity, Facility A, and Facility B, but not for Facility C. In this example, neither Facility C nor any of its Service Providers are submitted.
- If the **Include in 274** is set to **Yes** for an Entity and all its Facilities, users can block an individual Service Provider from the submission by selecting *No* in the **Include in 274** on the Service Provider screen.

For the MCO System of Care, there is no distinction between *Provider Group* and *Site*. An MCO Organization, whether a multi-provider organization or a Single-provider organization/Contractor, represents both Provider Group and Site in the 274 submission. Therefore, its data in Sharecare is used for both segments.

- If the **Include in 274** flag is set to *NO* for an *MCO Provider > Provider Organization*, neither the Provider Organization nor its associated providers/contractors are reported.
- If the **Include in 274** flag is set to *NO* for an individual MCO Provider in the *MCO Provider > MCO Provider* screen, the provider is not included.
- For an MCO Provider to be reported - the provider must be active, the **Include in 274** flag must be set to **YES** on the *MCO Provider > MCO Provider* screen, AND the provider must be linked to an MCO Provider Organization with the **Include in 274** flag set to **YES**.

Configuring the Application

The following must be completed before the first 274 submission – testing or production.

Review the Existing Option Lists Used in 274 Submission

The local ShareCare administrator must populate or review the HIPAA XREF Codes in the following **existing** Option Lists.

Screen Path	Screen Field Label	Option List Group	Comment
Fiscal > MCO Provider > Provider Organization > Provider Organization	County Code	county_OL	Populate 2-digit County Code in HIPAA XREF Code
Fiscal > Service Provider > Service provider	Gender	gender_OL	The county may continue to use local gender description, but the HIPAA XREF Code in the Gender Option List must be populated with HIPAA 274 valid Codes found in Appendix A - Option List #13.
Fiscal > Service Provider > Service provider Credentialing > License	State	state_OL	The HIPAA XRef column is populated with the current description. The local administrator should review and update the HIPAA XREF value if a value other than the current description should be used.
Fiscal > Service Provider > Service Provider Credentialing > Credential	Credential Type	credential_type_OL	Populate the HIPAA XRef column with the HIPAA 274 valid codes found in Appendix A - Option List #14.
Fiscal > Service Provider > Service provider Credentialing > Training Event	Training Event Type	provider_training_event_ol	<p>** This set is only required IF the County opts to use the "Training Event" screen to store Cultural Competence data**</p> <p>There is a new Global Option that controls how Cultural Competence data is entered. In <i>Implementation > Customer > Implementation Variables</i>,</p> <ul style="list-style-type: none"> If the <i>Service Provider 274 Monthly</i> value is selected, the user must enter the Cultural Competence data on the Service Provider 274 Monthly screen. If the Training Event option is selected, the user must enter a new record of Training Event, select <i>Cultural Competence</i>, and enter the training hours.
Fiscal > MCO Provider > Provider Organization > Provider Organization	Gender	gender_OL	<p>For Single-Provider or Contractor MCO Organization</p> <p>The county may continue to use local gender description, but the HIPAA XREF Code in the Gender Option List must be populated with HIPAA 274 valid Codes found in Appendix A - Option List #13.</p>
Fiscal > MCO Provider > MCO Provider > Provider	Gender	gender_OL	<p>For Multi-Provider MCO Organization's Provider</p> <p>The county may continue to use local gender description, but the HIPAA XREF Code in the Gender Option List must be populated with HIPAA 274 valid Codes found in Appendix A - Option List #13.</p>
Fiscal > MCO Provider > MCO Provider > License	State	state_OL	The HIPAA XRef column is populated with the current description. The local administrator should review and update the HIPAA XREF value if a value other than the current description should be used.

The new Option Lists created by Echo for this project include the HIPAA XREF Codes. The local ShareCare administrator should review these to ensure that no additions or updates are needed. Appendix A includes a list of these 274 submission Option Lists with the valid HIPAA XREF Codes used.

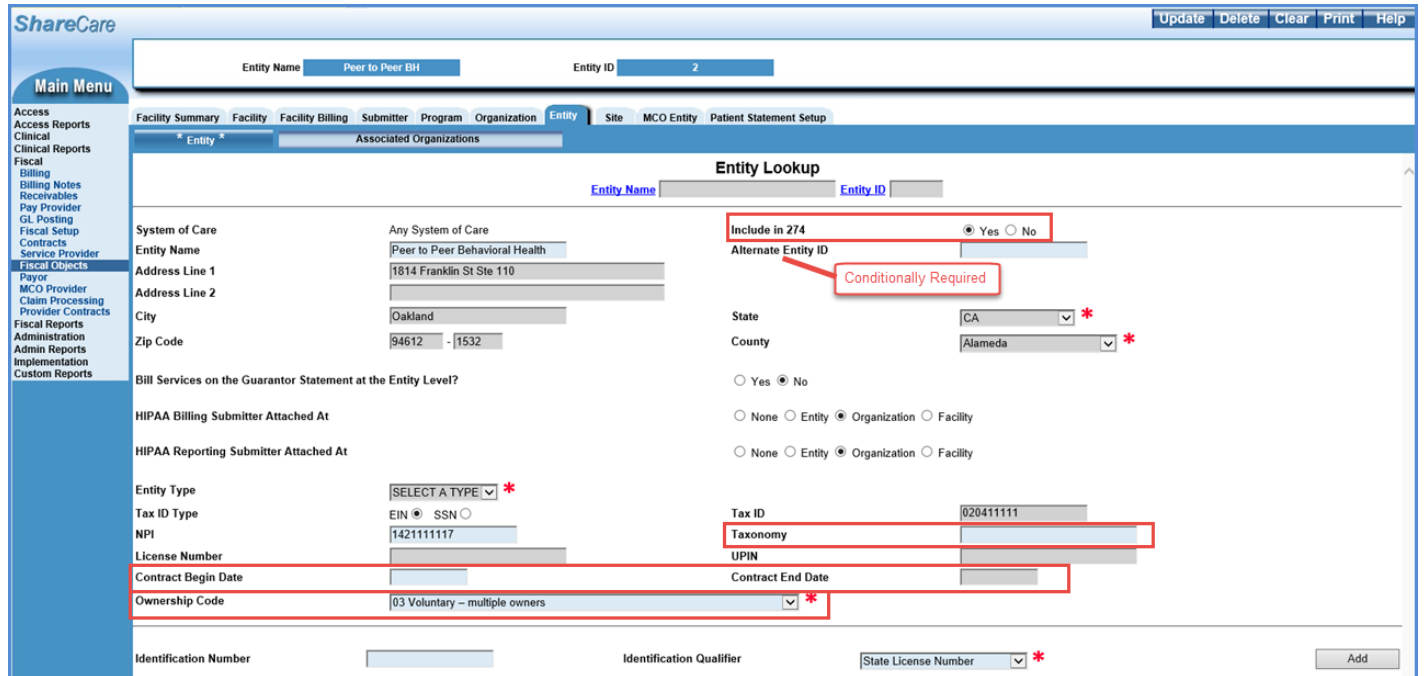
Option List Group	Option List Group ID	Description
274_area_of_expertise_OL	11065	274 Area of Expertise
274_assistive_aid_indicator_OL	11061	274 Assistive Aid Indicator
274_assistive_transportation_OL	11062	274 Assistive Transportation
274_calendar_code_OL	11063	274 Calendar Code
274_credential_type_OL	11071	274 Credential Type
274_gender_OL	11070	274 Gender
274_HIPAA_274_facility_type_OL	11059	274 Facility Type
274_HIPAA_274_institutional_type_OL	11060	HIPAA 274 Institutional Type
274_ownership_code_OL	11058	274 Ownership Code
274_practice_focus_OL	11066	274 Practice Focus
274_professional_affiliation_OL	11069	274 Professional Affiliation
274_profit_status_OL	11068	274 Profit Status
274_service_type_OL	11067	274 Service Type
274_speaking_proficiency_OL	11072	274 Speaking Proficiency
274_telehealth_indicator_OL	11073	274 Telehealth Indicator
274_training_event_global_OL	11074	274 Training Event Entry Type
274_type_of_board_certification_OL	11064	274 Type of Board Certification

Existing Screen Updates for Capturing 274 Data

Review the following screens and fields created for capturing additional 274 data. The data collected in these screens must be populated before a 274 submission is created.

Screen Updates for MHS and ADP Systems of Care

Entity – The top tier of the 274 data structure is *Provider Group*. In ShareCare MHS and ADP Systems of Care, the Entity screen, *Fiscal > Fiscal Objects > Entity*, was updated to capture Provider Group data.

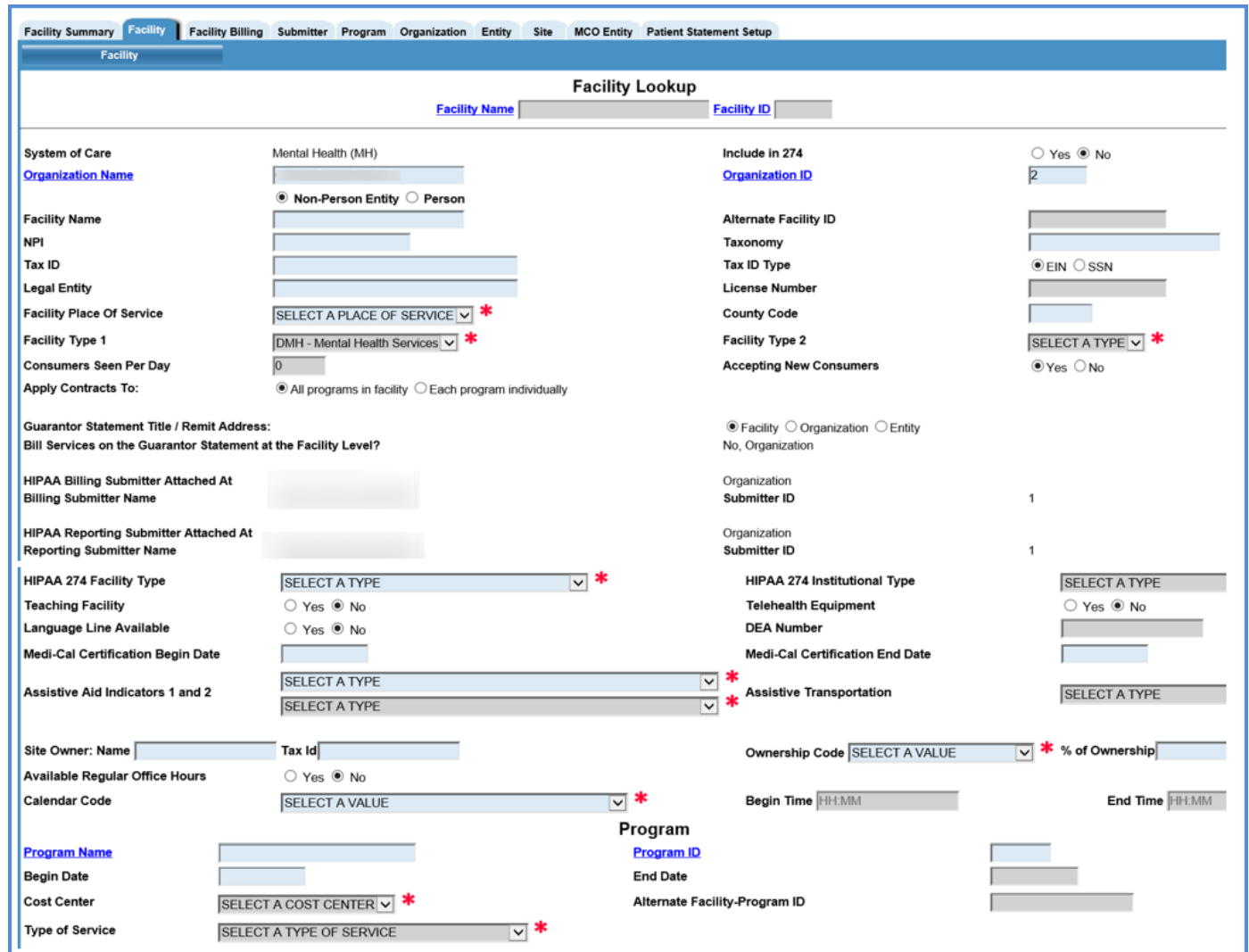


In the image above, the new data fields are outlined in RED; Alternate Entity ID was updated. Details for all fields are listed below.

Field Label	Required	New/Existing	Validation	Comment
Include in 274	Yes	New		If yes, then this Entity (Provider Group) and its sub-structure data will be considered for reporting.
Ownership Code	Yes	New		The drop-down is populated with values from the 274 Ownership Code Option List.
Begin Date	Yes	New		
End Date	No	New	Must be greater than Begin Date.	
Taxonomy	Yes	New	Uses standard Taxonomy code validation.	
Alternate Entity ID	Situationally	Existing	Change from Optional to "Required" if Include in 274 is Yes.	This entity code used to match entity code in the Facility record.

Facility - The middle tier of the 274 data structure is *Sites*. In ShareCare MHS and ADP Systems of Care, the Facility and associated screens were updated to capture HIPAA 274 *Sites* data.

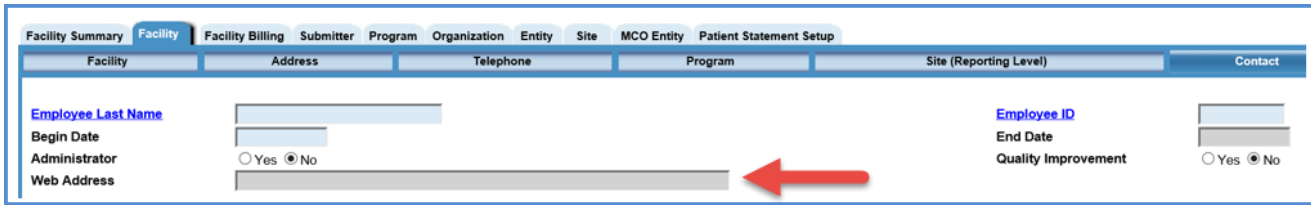
In *Fiscal > Fiscal Objects > Facility*, twenty-one new data fields were added, and two existing data fields were updated. Users must first select the Organization for the 274 related data fields to appear.



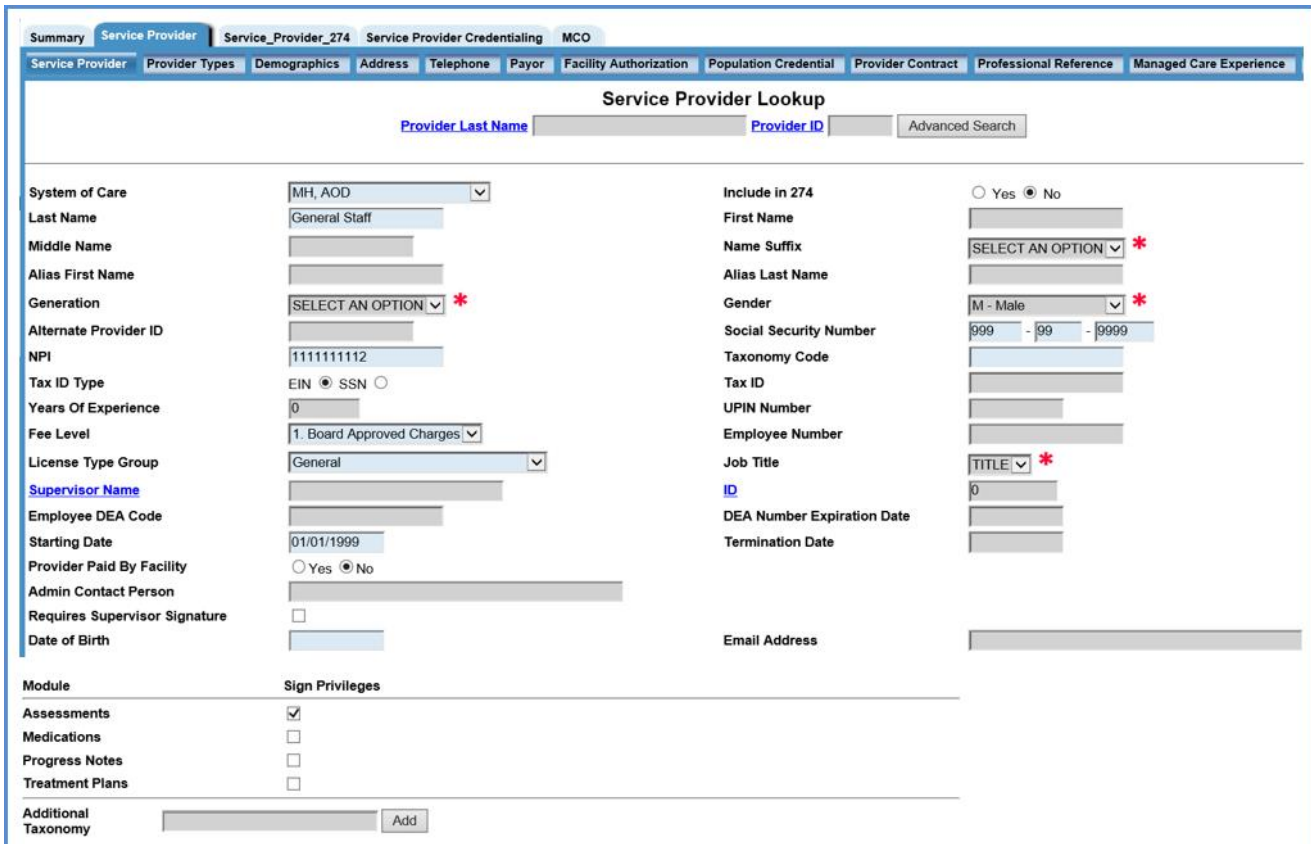
Field Label	Required	New or Existing	Validation	Comment
Included in 274	Yes	New		If yes, then this Facility (Site) and its sub-structure data are considered for reporting.
Taxonomy Code	Yes	New	Standard Taxonomy validation	**Note** The position of "Alternate Facility ID" and "NPI" are rearranged.
Legal Entity	Yes	Existing		This field is changed to a "required" field because it is used to match the Legal Entity (Provider Group) record. All facilities with the same Legal Entity code are submitted in the 274 under that Provider Group.

County Code	Yes	Existing		Changed from Optional to "Required" field.
HIPAA 274 Facility Type	Yes	New		The drop-down is populated with values from the <i>274 Facility Type</i> Option List.
HIPAA 274 Institution Facility Type	No	New		The drop-down is populated with values from the <i>HIPAA 274 Institutional Type</i> Option List.
Teaching Facility	Yes	New		Indicates if this is a teaching facility
Telehealth Equipment	Yes	New		Indicates if the site has appropriate telehealth equipment available
Language Line Available	Yes	New		Indicates if the site has the capability to utilize a language line service to screen and/or render services in a non-English language
DEA Number	No	New		
Medi-Cal Certification Begin Date	Yes	New	Valid date format	
Medi-Cal Certification End Date	No	New	Valid date format & cannot be before Begin Date.	
Assistive Indicator 1	Yes	New		The drop-down is populated with values from the <i>274 Assistive Aid Indicator</i> Option List.
Assistive Indicator 2	No	New		The drop-down is populated with values from the <i>274 Assistive Aid Indicator</i> Option List.
Assistive Transportation	No	New		The drop-down is populated with values from the <i>274 Assistive Transportation</i> Option List.
Site Owner Name	Yes	New		
Tax ID (Site Owner's)	Yes	New		
Ownership Code	Yes	New		The drop-down is populated with values from the <i>274 Ownership Code</i> Option List.
Ownership %	Yes	New	Numeric between 1 to 100 - No decimal point.	
Available Regular Office Hours	Yes	New		** Note** If entry is "No", then user is required to enter the next three fields: Calendar Code, Begin Time, and End Time. (Multiple entries of all three fields is allowed if applicable.) Existing entries are displayed on the screen and can be updated or deleted.
Calendar Code	Situationally	New		The drop-down is populated with values from the <i>274 Calendar Code</i> Option List.
Begin Time	Situationally	New	Hours between 00 to 23	
Additional Taxonomy	Situationally	Alpha-numeric	Standard Taxonomy code validation	Multiple entries are allowed.

Contact - in *Fiscal > Fiscal Objects > Facility > Contact*, a new *Web Address* field was added. Use to enter the URL of the Site's public web address.

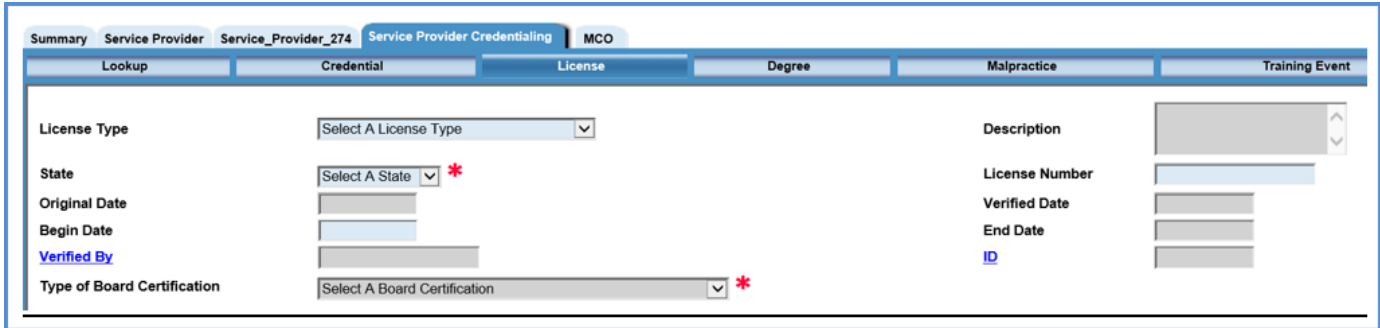


Service Provider - The third tier of the 274 data structure is *Service Provider*. In ShareCare MHS and ADP Systems of Care, the *Service Provider* and associated screens were updated to capture HIPAA 274 data.



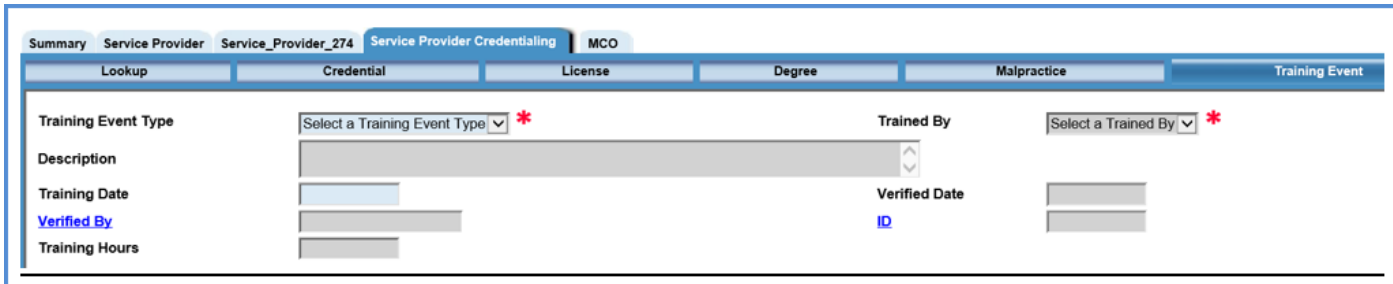
Field Label	Required	New or Existing	Validation	Comment
Included in 274	Yes	New		If yes, then this Service Provider's data will be considered for reporting.
Taxonomy Code	Yes	Existing		Existing field changed from optional to required.
Social Security Number	Yes	Existing		Field level security is to be added in a future release.
Date of Birth	Yes	New		
Email Address	No	New		
Additional Taxonomy	No	New		Use to enter additional Taxonomy codes if applicable; multiple entries are allowed. Existing entries are displayed and may be updated or deleted.

License - In Fiscal > Service Provider > Service Provider Credentialing



- **State and License Number** – These existing data fields were changed from optional to required.
- **Type of Board Certification** – This new data field was added. The drop-down values are pulled from the 274 Type of Board Certification Option List.

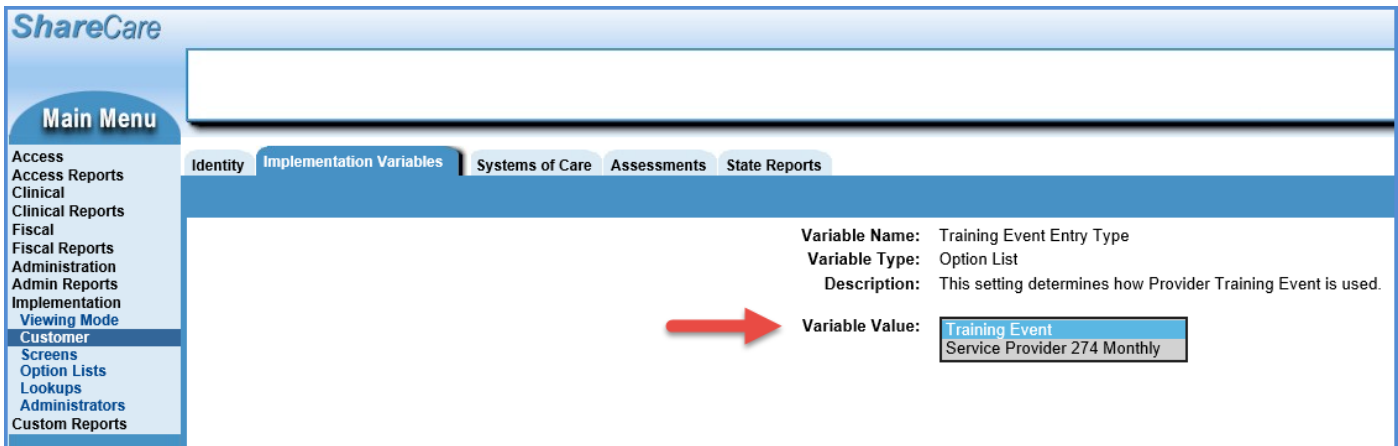
Training Event - In Fiscal > Service Provider > Service Provider Credentialing



Counties can opt to use the *Training Event* screen to record *Cultural Competence* training hours. When *Cultural Competence* is selected as the **Training Event Type**, the **Training Hours** data field is required. This is the image above.

A second option is available which requires users to enter Cultural Competence information in the new screen *Service Provider 274 Monthly*. The new global option which controls how *Cultural Competence* training is recorded is found in *Implementation > Customer > Implementation Variables*. Select the *Training Event Type* Option List.

- If the *Service Provider 274 Monthly* value is selected, the user must enter the Cultural Competence data on the Service Provider 274 Monthly screen.
- If the Training Event option is selected, the user must enter a new record of Training Event, select *Cultural Competence*, and enter the training hours.



ShareCare

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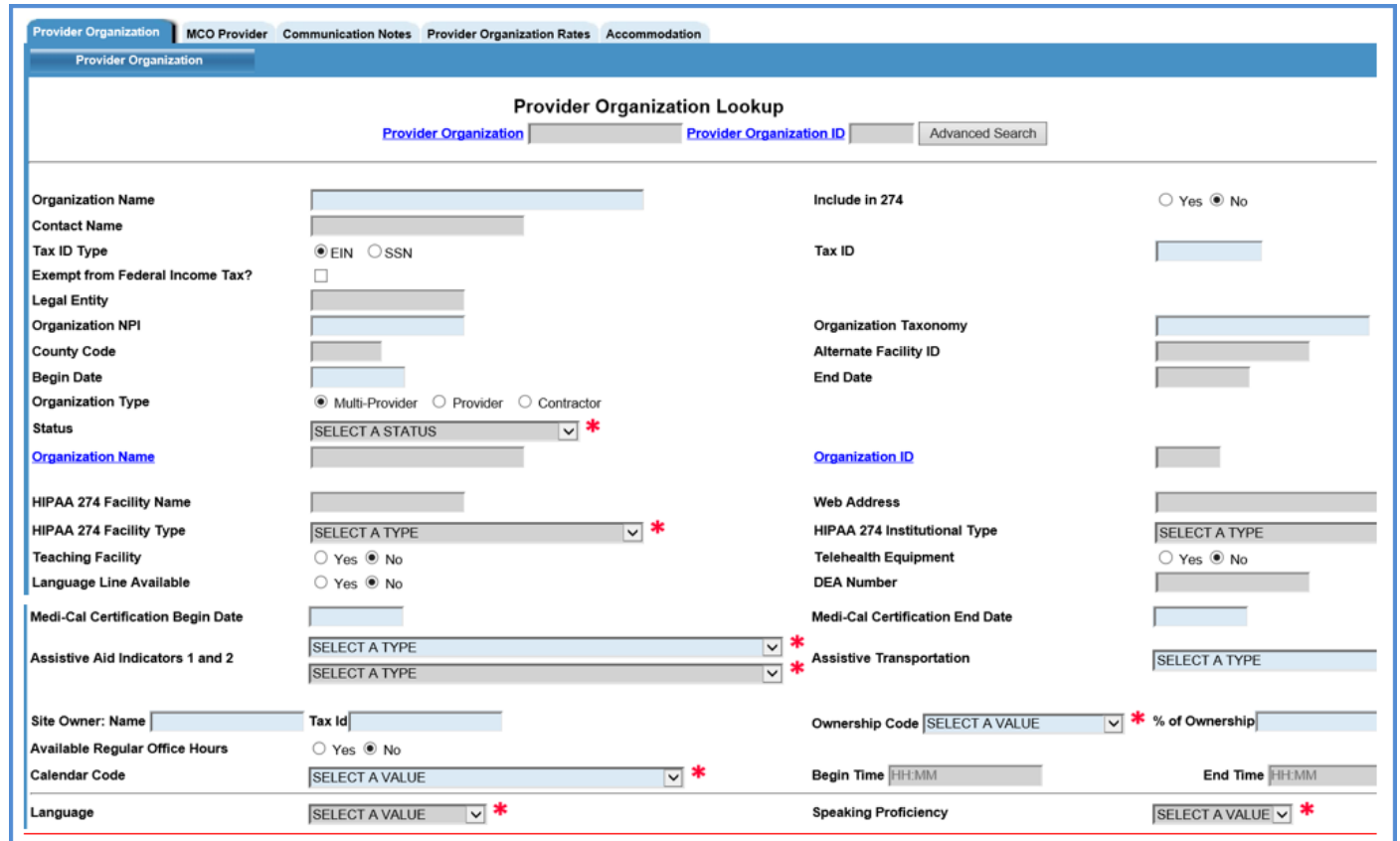
Identity **Implementation Variables** Systems of Care Assessments State Reports

Variable Name: Training Event Entry Type
 Variable Type: Option List
 Description: This setting determines how Provider Training Event is used.

Variable Value: **Training Event**
 Service Provider 274 Monthly

Screen Updates for MCO System of Care

Multi-Provider Organization - In Fiscal > MCO Provider > Provider Organization



Field Label	Required	New or Existing	Validation	Comment
Included in 274	Yes	New		If yes, then this MCO Organization and its sub-structure data is considered for reporting.
Organization NPI	Yes	New	Standard NPI validation	
Taxonomy	Yes	New	Standard taxonomy code validation	
HIPAA 274 Facility Name	No	New		Enter this site name only if it is different than the Organization Name.
Web Address	No	New		
Ownership Code	Yes	New	Option List	The drop-down is populated with values from the 274 Ownership Code Option List.
HIPAA 274 Facility Type	No	New	Option List	The drop-down is populated with values from the 274 Facility Type Option List.

HIPAA 274 Institutional Type	No	New	Option List	The drop-down is populated with values from the HIPAA 274 Institutional Type Option List.
Teaching Facility	Yes	New		
Telehealth Equipment	Yes	New		
Language Line Available	Yes	New		
DEA Number	No	New		
Medi-Cal Certification Begin Date	Yes	New	Valid date format	
Medi-Cal Certification End Date	No	New	Valid date format & cannot be before Begin Date.	
Assistive Aid Indicators 1	Yes	New	Option List	The drop-down is populated with values from the 274 Assistive Aid Indicator Option List.
Assistive Aid Indicators 2	No	New	Option List	The drop-down is populated with values from the 274 Assistive Aid Indicator Option List.
Assistive Transportation	Yes	New	Option List	The drop-down is populated with values from the 274 Assistive Transportation Option List.
Note - The following four fields related to site ownership information can be repeated multiple times if there are multiple owners. At least one set of ownership data is required.				
Site Owner Name	Yes	New		
Site Owner Tax ID	Yes	New		
Ownership Code	Yes	New	Option List	The drop-down is populated with values from the 274 Ownership Code Option List.
Ownership Percentage	Yes	New	Must be between 1 to 100. Value must be 100 if only one record is entered. When multiple records are entered, the total % cannot exceed 100.	
Available Regular Office Hours	Yes	New		
Note The following three fields related to office hours are only required if the <i>Available Regular Office Hours</i> above is NO.				
Calendar Code	Situationally	New	Option List	
Begin Time	Situationally	New		
End Time	Situationally	New		
Additional Taxonomy	No	New		User may enter one or multiple additional taxonomy codes

Single Provider (Contractor) - In Fiscal > MCO Provider > Provider Organization

Provider Organization | MCO Provider | Communication Notes | Provider Organization Rates | Accommodation

* Provider Organization *

Provider Organization Lookup

Provider Organization Provider Organization ID

Organization Name	<input type="text"/>	Include in 274	<input type="radio"/> Yes <input checked="" type="radio"/> No
Contact Name	<input type="text"/>	Tax ID	<input type="text"/>
Tax ID Type	<input checked="" type="radio"/> EIN <input type="radio"/> SSN	Organization Taxonomy	<input type="text"/>
Exempt from Federal Income Tax?	<input type="checkbox"/>	Alternate Facility ID	<input type="text"/>
Legal Entity	<input type="text"/>	End Date	<input type="text"/>
Organization NPI	<input type="text"/>	Organization Type	<input type="radio"/> Multi-Provider <input checked="" type="radio"/> Provider <input type="radio"/> Contractor
County Code	<input type="text"/>	Last Name	<input type="text"/>
Begin Date	<input type="text"/>	Middle Name	<input type="text"/>
Organization Type	<input type="radio"/> Multi-Provider <input checked="" type="radio"/> Provider <input type="radio"/> Contractor	Contact	<input type="text"/>
First Name	<input type="text"/>	Social Security Number	<input type="text"/> - <input type="text"/> - <input type="text"/>
Gender	SELECT AN OPTION * <input type="text"/>	NPI	<input type="text"/>
Provider Information	<input type="text"/>	Fee Level	Select a Fee Level <input type="text"/>
Taxonomy Code	<input type="text"/>	Date Of Birth	<input type="text"/>
License Type Group	Select a License Type Group <input type="text"/>	Status	SELECT A STATUS * <input type="text"/>
Email	<input type="text"/>	Organization Name	<input type="text"/>
Organization ID	<input type="text"/>	HIPAA 274 Facility Name	<input type="text"/>
Web Address	<input type="text"/>	HIPAA 274 Facility Type	SELECT A TYPE * <input type="text"/>
HIPAA 274 Institutional Type	SELECT A TYPE <input type="text"/>	Teaching Facility	<input type="radio"/> Yes <input checked="" type="radio"/> No
Telehealth Equipment	<input type="radio"/> Yes <input checked="" type="radio"/> No	Language Line Available	<input type="radio"/> Yes <input checked="" type="radio"/> No
DEA Number	<input type="text"/>	Medi-Cal Certification Begin Date	<input type="text"/>
Medi-Cal Certification End Date	<input type="text"/>	Assistive Aid Indicators 1 and 2	SELECT A TYPE * <input type="text"/>
Assistive Transportation	SELECT A TYPE * <input type="text"/>	Site Owner: Name	<input type="text"/>
Ownership Code	SELECT A VALUE * <input type="text"/> % of Ownership <input type="text"/>	Tax Id	<input type="text"/>
Begin Time	HH:MM <input type="text"/>	Available Regular Office Hours	<input type="radio"/> Yes <input checked="" type="radio"/> No
End Time	HH:MM <input type="text"/>	Calendar Code	SELECT A VALUE * <input type="text"/>
Speaking Proficiency	SELECT A VALUE * <input type="text"/>	Language	SELECT A VALUE * <input type="text"/>

Field Label	Required	New or Existing	Validation	Comment
Included in 274	Yes	New		If yes, then this MCO Organization and its sub-structure data will be considered for reporting.
County Code	Yes	Existing		Change from optional to required.
Gender	Yes	New	Option List	Changed from optional to required. Note: Sharecare Admin needs to populate additional 274 XREF codes if using existing Option List.
Social Security Number	Yes	Existing		Field level security is to be added in a future release.
Taxonomy Code	Yes	Existing		Changed from optional to required.
Date of Birth	Yes	New		
Email Address	Yes	New		

Ownership Code	Yes	New	Option List	The drop-down is populated with values from the 274 Ownership Code Option List.
HIPAA 274 Facility Name	No	New		Enter this site name only if it is different than the Organization Name.
HIPAA 274 Facility Type	No	New	Option List	The drop-down is populated with values from the 274 Facility Type Option List.
HIPAA 274 Institutional Type	No	New	Option List	The drop-down is populated with values from the HIPAA 274 Institutional Type Option List.
Teaching Facility	Yes	New		
Telehealth Equipment	Yes	New		
Language Line Available	Yes	New		
DEA Number	No	New		
Medi-Cal Certification Begin Date	Yes	New	Valid date format	
Medi-Cal Certification End Date	No	New	Valid date format & cannot be before Begin Date.	
Assistive Aid Indicators 1	Yes	New	Option List	The drop-down is populated with values from the 274 Assistive Aid Indicator Option List.
Assistive Aid Indicators 2	No	New	Option List	The drop-down is populated with values from the 274 Assistive Aid Indicator Option List.
Assistive Transportation	Yes	New	Option List	The drop-down is populated with values from the 274 Assistive Transportation Option List.
Web Address	No	New		
Note The following three fields related to site ownership information can be repeated multiple times if there are multiple owners. At least one set of ownership data is required.				
Site Owner Name	Yes	New		
Site Owner Tax ID	Yes	New		
Ownership Code	Yes	New	Option List	The drop-down is populated with values from the 274 Ownership Code Option List.
Available Regular Office Hours	Yes	New		
Note The following three fields related to office hours are only required if the Available Regular Office Hours above is NO.				
Calendar Code	Situationally	New	Option List	
Begin Time	Situationally	New		
End Time	Situationally	New		
Additional Taxonomy	No	New		User may enter one or multiple additional taxonomy codes
Languages	Yes	Existing	Change from optional to required.	

			<p>**Note** If this site does not provide service in English, then at least two languages must be entered. 1. English – (HIPAA XREF Code = "ENG") and select Speaking Proficiency with HIPAA XREF Code = "4" (Poor)</p> <p>2. One or more other languages in which service is provided and its Speaking Proficiency must be "Excellent"</p>
Speaking Proficiency	Yes	Option List	The drop-down is populated with values from the 274 Speaking Proficiency Option List.

Provider (Multi) - In Fiscal > MCO Provider > MCO Provider

Provider Organization **MCO Provider** | MCO Service Provider 274 | Communication Notes | Provider Organization Rates | Accommodation

Provider

Provider Lookup

[Provider Last Name](#)
[MCO Provider ID](#)

Last Name	<input type="text"/>	Include in 274	<input type="radio"/> Yes <input checked="" type="radio"/> No
Middle Name	<input type="text"/>	First Name	<input type="text"/>
Contact	<input type="text"/>	Gender	SELECT AN OPTION * <input type="text"/>
Social Security Number	<input type="text"/> - <input type="text"/> - <input type="text"/>	Provider Information	<input type="text"/>
NPI	<input type="text"/>	Taxonomy Code	<input type="text"/>
Fee Level	Select a Fee Level <input type="text"/>	License Type Group	Select a License Type Group <input type="text"/>
Date Of Birth	<input type="text"/>	Email	<input type="text"/>
DEA Number	<input type="text"/>	End Date	<input type="text"/>
Begin Date	<input type="text"/>	Alternate Provider End Date	<input type="text"/>
Alternate Provider ID	<input type="text"/>	Alternate Provider Begin Date	<input type="text"/>
Alternate Provider Begin Date	<input type="text"/>	Speaking Proficiency	SELECT A VALUE * <input type="text"/>
Language	SELECT A VALUE * <input type="text"/>		

Additional fields are available for entry after clicking the **ADD** button to insert a record, as shown below. In Update mode, all fields appear at once.

Additional Taxonomy

Language	SELECT A VALUE * <input type="text"/>	Speaking Proficiency	SELECT A VALUE * <input type="text"/>	<input type="button" value="Add"/>
Language	English	Speaking Proficiency	Poor	

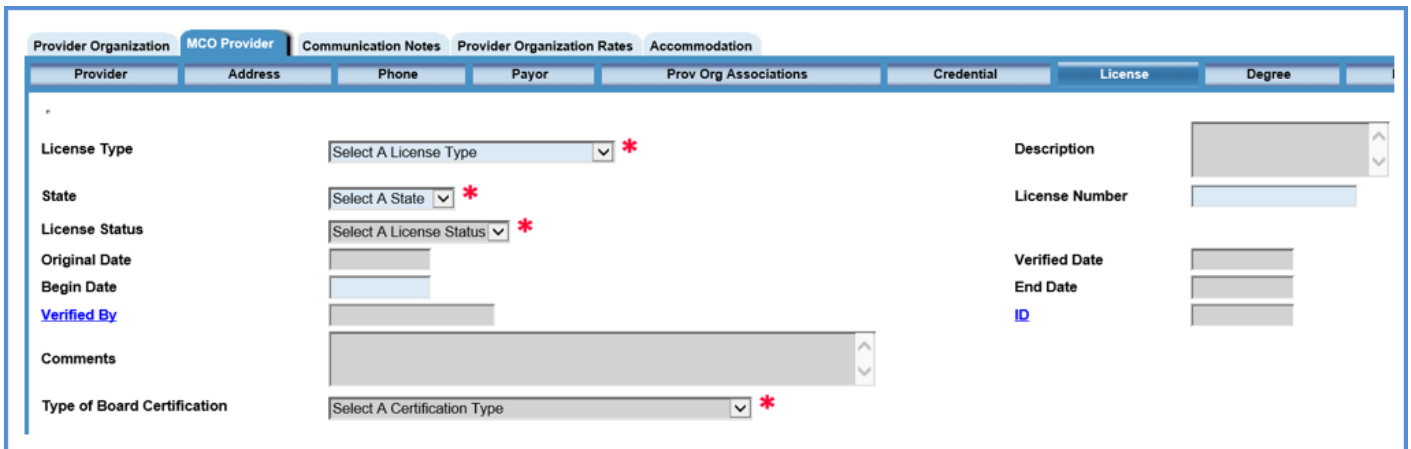
Races	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>
Special Skills	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>
Locations	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>
Accessibility	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>
Catchment Area	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>
Service Type	SELECT AN OPTION * <input type="text"/>	<input type="button" value="Add"/>

The following table lists the new and updated fields for the MCO Provider screen.

Field Label	Required	New or Existing	Validation	Comment
Included in 274	Yes	New		If yes, then this MCO Provider and its data are considered for reporting.
Gender	Yes	Existing	Option List	Changed from optional to required. Note: Sharecare Admin

				needs to populate additional 274 XREF codes if using the existing Option List.
Social Security Number	Yes	Existing		Field level security is to be added in a future release.
Taxonomy Code	Yes	Existing		Changed from optional to required.
Date of Birth	Yes	New		
DEA Number	No	New		
Additional Taxonomy	No	New		User may enter none, one, or multiple additional taxonomy codes
Languages	Yes	Existing		<p>Changed from optional to required.</p> <p>**NOTE** If this MCO Provider is not proficient in English, then at least two languages must be entered. 1. English – (HIPAA XREF Code = "ENG") and select Speaking Proficiency with HIPAA XREF Code = "4" (Poor)</p> <p>2. One or more other languages in which service is provided, and its Speaking Proficiency must be "Excellent."</p>

License - In MCO Provider > MCO Provider



- **State** and **License Number** – These existing data fields were changed from optional to required.
- **Type of Board Certification** – This new data field was added. The drop-down values are pulled from the 274 *Type of Board Certification* Option List.

New Screens for Capturing HIPAA 274 Data

For MHS and ADP Systems of Care

Service Provider 274 – This screen captures additional Provider data specific to a Facility. This data may change from time to time. The screen tab is located between *Service Provider* and *Service Provider Credentialing*. Records created via this screen should be **per Provider per Site (Facility)**. For example, if you have a provider who works at three different facilities, enter three records – one for each Facility.

A user may not create a new record in the *Service Provider 274* screen unless the following three requirements are satisfied.

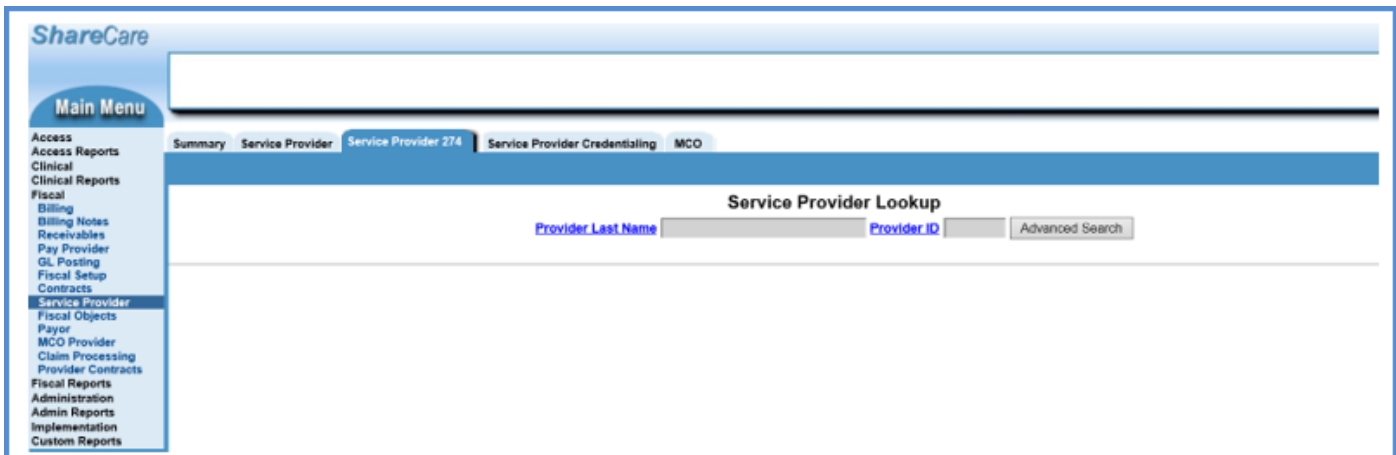
- The Facility is created.
- The Service Provider is created.
- The Provider's Facility Authorization is created to link the provider with the Facility.

A user must also have **Facility** and **Service Provider** "Users Group" access and the appropriate access for the following operations. (i.e., the user must be authorized to access the Facility and the Service Provider) An error message displays if the user is not authorized to access the selected Facility or Service Provider.

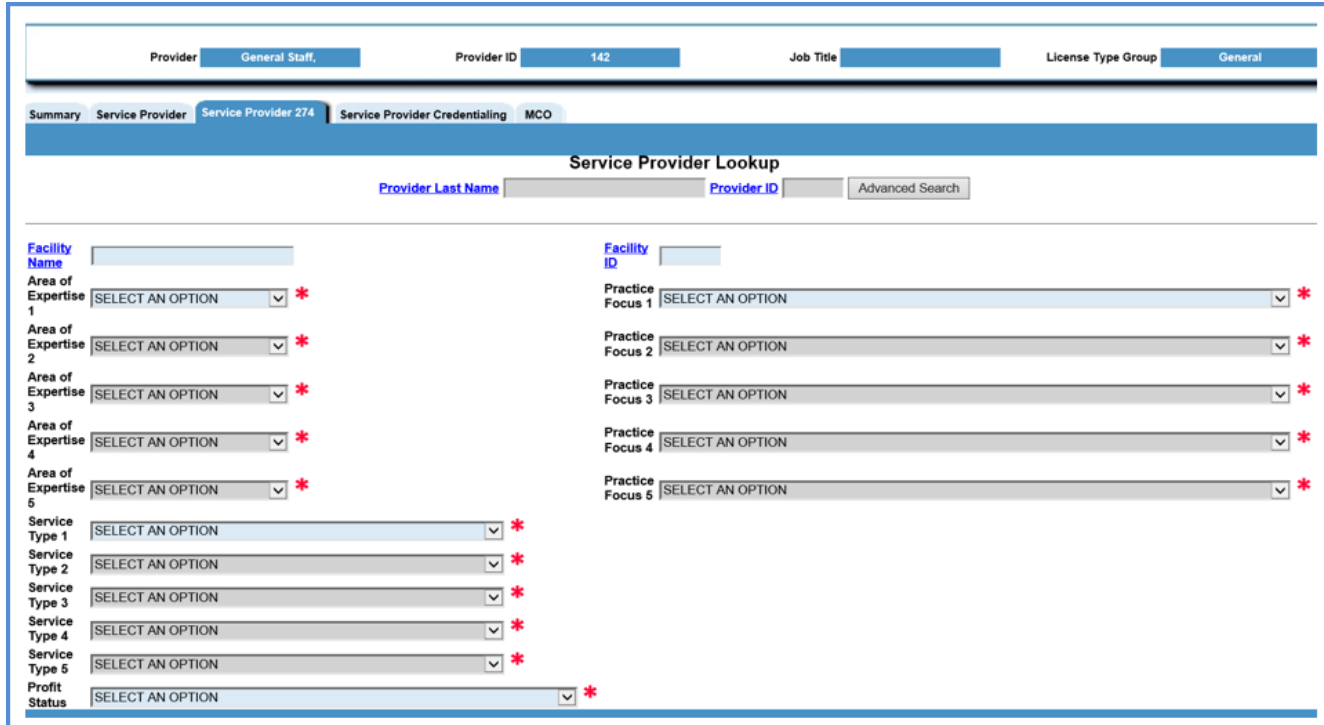
- **Insert** – Enter a Facility Name or ID and Provider Last Name or ID.
 - This is the unique key of a record.
 - A hyperlink is provided to lookup Facility by Name or ID, and to lookup Service Provider by Last Name or ID.
 - An error message displays if there is an existing record with this key.
 - Click the "Insert" button when completed.
- **Lookup** – Enter Facility and Provider to locate a record.
 - An error message displays if no matching record.
 - Click the "Close" button when done.
- **Update** – Enter Facility and Provider to locate the record to update.
 - An error message displays if there is no matching record.
 - Enter changes and click the "Update" button when done.
- **Delete** – Enter Facility and Provider to locate the record to Delete.
 - An error message displays if there is no matching record.
 - Click the "Delete" button to archive the selected record.
 - Otherwise, click the "Close" button to exit without deleting the record.

Enter Data on the Service Provider 274 Screen

1. Start by entering the Provider Name or ID



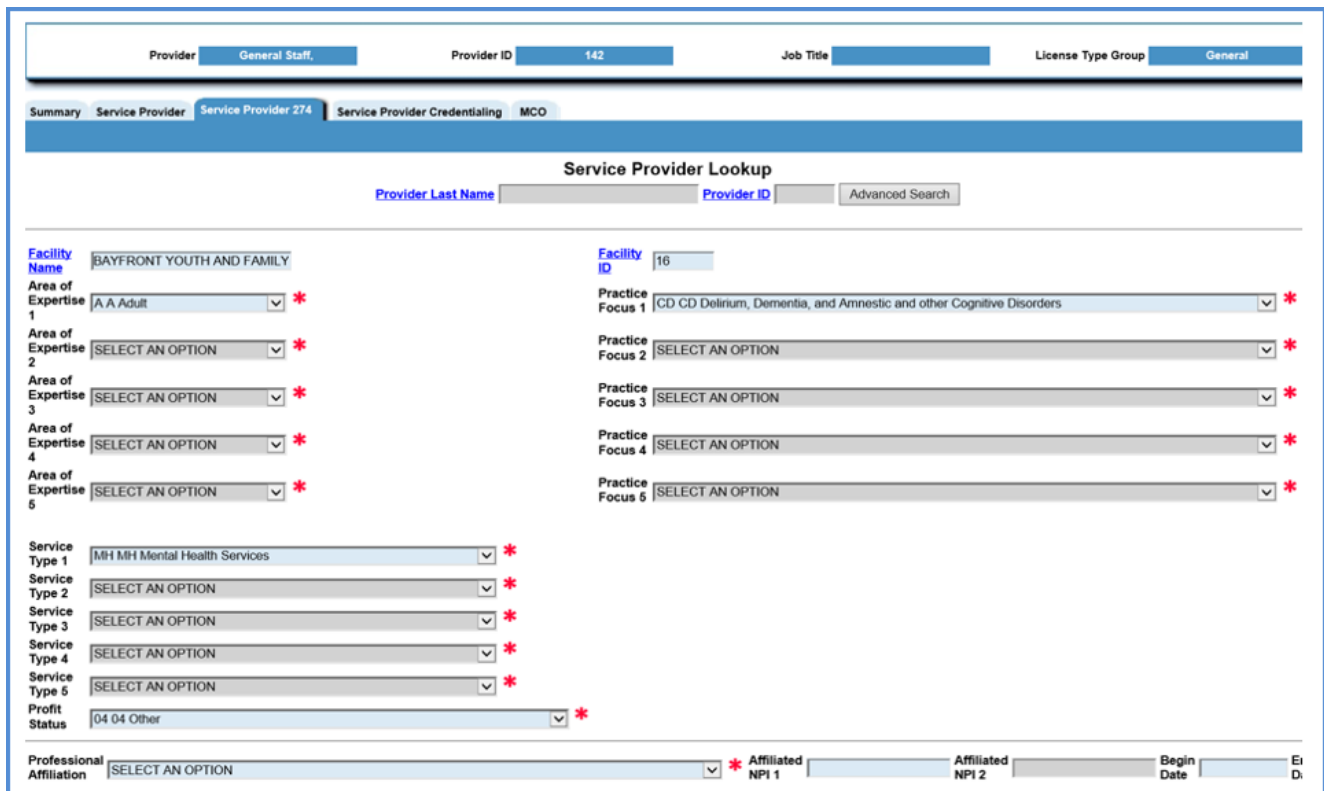
2. Click the *NEW* button to insert a record, the following screen displays



The screenshot shows the 'Service Provider Lookup' form. At the top, there are tabs for 'Summary', 'Service Provider', 'Service Provider 274', 'Service Provider Credentialing', and 'MCO'. Below the tabs, the form title is 'Service Provider Lookup'. There are input fields for 'Provider Last Name' and 'Provider ID', and an 'Advanced Search' button. The form contains several sections of dropdown menus, each with a red asterisk indicating a required field:

- Facility Name:** [Empty]
- Facility ID:** [Empty]
- Area of Expertise 1-5:** Each dropdown is set to 'SELECT AN OPTION'.
- Practice Focus 1-5:** Each dropdown is set to 'SELECT AN OPTION'.
- Service Type 1-5:** Each dropdown is set to 'SELECT AN OPTION'.
- Profit Status:** Dropdown set to 'SELECT AN OPTION'.

3. Enter the Facility and select option value(s) for *Are of Expertise, Practice Focus, Service Type, and Profit Status.*
4. Then click *ADD* to insert the record on top of screen.
5. You can then optionally enter one or more Professional Affiliations at the bottom of the screen. Click *ADD* at the end of the line to add Professional Affiliation.



This screenshot shows the same 'Service Provider Lookup' form, but with several fields populated:

- Facility Name:** BAYFRONT YOUTH AND FAMILY
- Facility ID:** 16
- Area of Expertise 1:** A A Adult
- Practice Focus 1:** CD CD Delirium, Dementia, and Amnestic and other Cognitive Disorders
- Service Type 1:** MH MH Mental Health Services
- Profit Status:** 04 04 Other

At the bottom of the form, there are additional fields for 'Professional Affiliation' (dropdown), 'Affiliated NPI 1', 'Affiliated NPI 2', 'Begin Date', and 'End Date'.

The following table lists the data fields in the new **Service Provider 274** screen.

Field Label	Required	Data Type	Validation	Comment
Facility Name	Yes		Must be existing Facility	Must enter either Facility Name or ID to identify an existing active facility.
Facility ID	Yes		Must be existing Facility	Must enter either Facility Name or ID to identify an existing active facility.
Provider Last Name	Yes		Must be existing Service Provider	Must enter either Provider's Last Name or ID to identify an existing active provider.
Provider ID	Yes		Must be existing Service Provider	Must enter either Provider's Last Name or ID to identify an existing active provider.
Area of Expertise	Yes	Option List	Multiple drop-down values may be selected.	The drop-down list values pull from the <i>274 Area of Expertise</i> Option List.
Practice Focus	Yes	Option List	Up to 5 drop-down values may be selected.	The drop-down list values pull from the <i>274 Practice Focus</i> Option List.
Service Type	Yes	Option List	Up to 5 drop-down values may be selected.	The drop-down list values pull from the <i>274 Service Type</i> Option List.
Profit Status	Yes	Option List		The drop-down list values pull from the <i>274 Profit Status</i> Option List.
NOTE The entry of the following <i>five</i> fields related to Professional Affiliation information is optional. Multiple records may be entered. If Professional Affiliation is entered, then <i>Affiliated NPI 1</i> and <i>Begin Date</i> are required. <i>Affiliated NPI 2</i> is optional.				
Professional Affiliation	No	Option List		The drop-down list values pull from the <i>274 Professional Affiliation</i> Option List.
Affiliated NPI 1	Situationally		Standard NPI validation	
Affiliated NPI 2	No		Standard NPI validation	
Begin	Situationally	Date		**NOTE** Professional Affiliation data is only submitted if the Begin/End period overlaps with the 274 submission month/year.
End	No	Date		

For MCO System of Care

MCO Service Provider 274— This screen captures additional data specific to MCO Provider (of Multi-provider or Single-provider MCO Organization) as this data may change from time to time. The screen tab is located immediately next to “**MCO Provider**” and has the same top screen banner as the MCO Provider screen. Users should created one record per MCO Provider, per Provider Organization; updates to be made as needed.

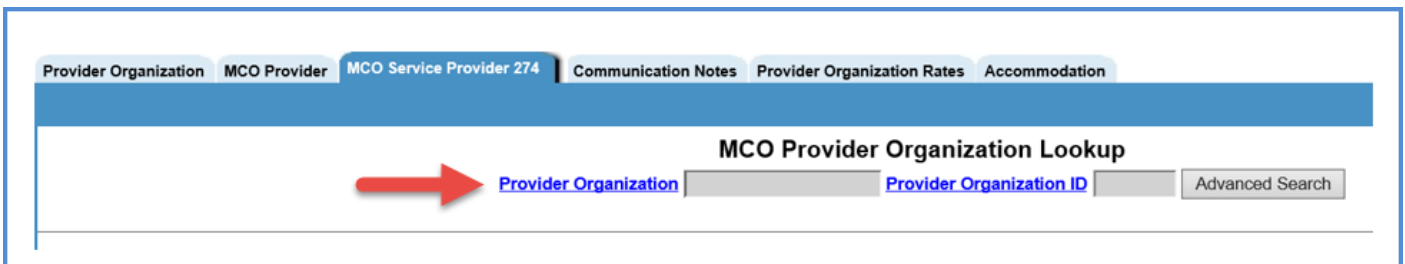
****NOTE**** User may not create a new record in this screen unless Provider Organization and MCO Provider have been created.

A user must also have **Provider Organization** and **MCO Provider** "Users Group" access and the appropriate access for the following operations. An error message displays if the user is not authorized to access the selected Provider Organization.

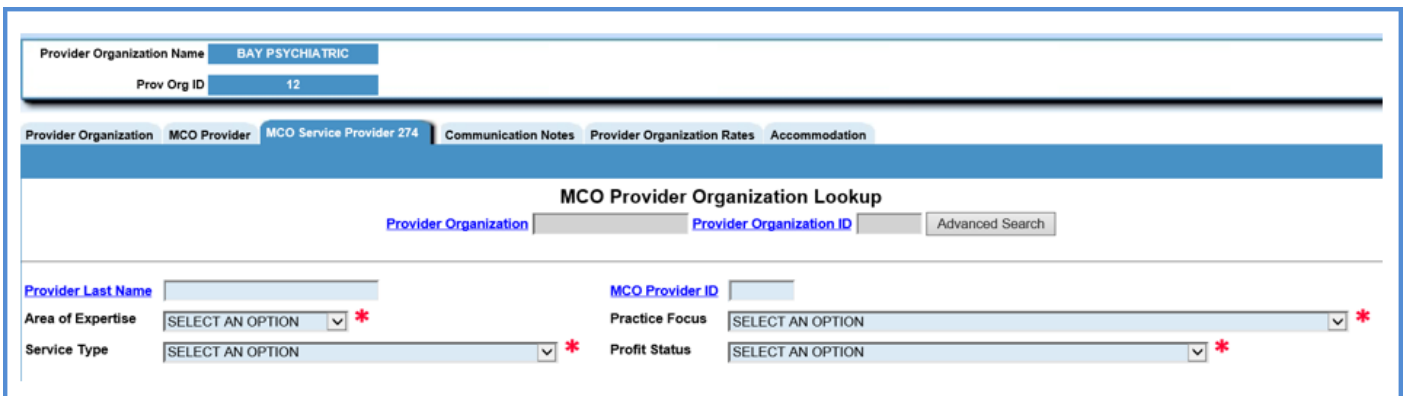
- **Insert** – Enter a Provider Organization name or ID and then Provider Last Name or MCO Provider ID.
 - This is the unique key of a record.
 - A hyperlink is provided to lookup Provider Organization by Name or ID, and to lookup MCO Provider by Last Name or MCO Provider ID.
 - An error message displays if there is an existing record with this key.
 - Click the "Insert" button when completed.
- **Lookup** – Enter Provider Organization and MCO Provider to locate a record.
 - An error message displays if there is no matching record.
 - Click the "Close" button when done.
- **Update** – Enter the Provider Organization and MCO Provider to locate the record to update.
 - An error message displays if there is no matching record.
 - Enter changes and click the "Update" button when done.
- **Delete** – Enter the Provider Organization and MCO Provider to locate the record to delete.
 - An error message displays if there is no matching record.
 - Click the "Delete" button to archive the selected record.
 - Otherwise, click the "Close" button to exit without deleting the record.

Enter data on the MCO Service Provider 274 Screen

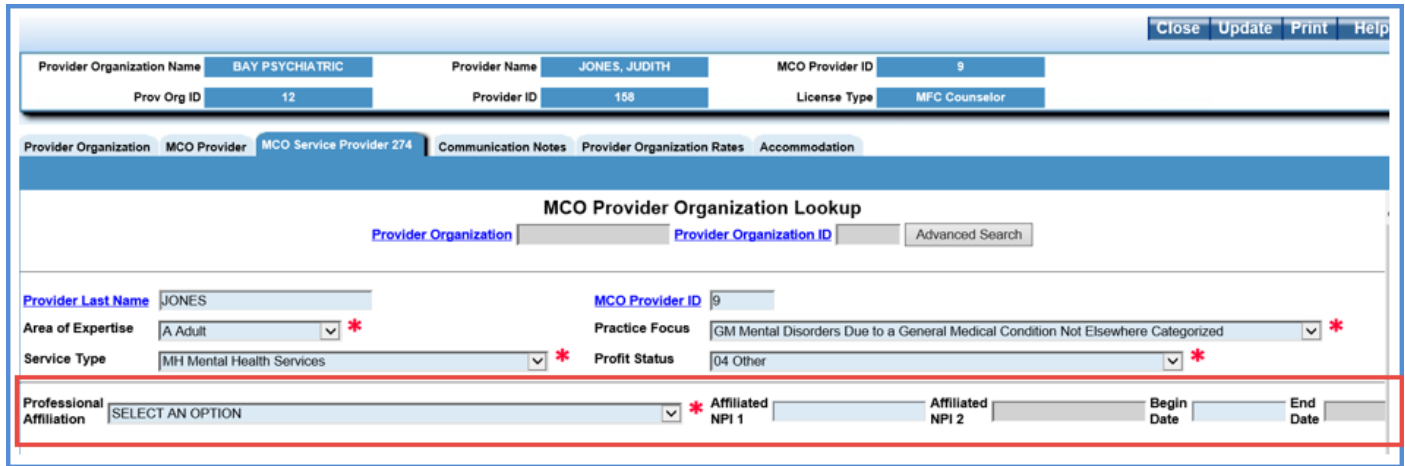
1. Select a Provider Organization.



2. Click the “New” button. Enter MCO Provider and his/her data associated with the selected Provider Organization.



3. Click the “Add” button to display the following screen. Enter “Professional Affiliation” information, if any, and then click the “Add” button (far right on the same line). Otherwise, click the “Close” button to finish.



The following table lists the data fields in the new **MCO Service Provider 274** screen.

Field Label	Required	Data Type	Validation	Comment
Provider Organization	Yes		There must be an existing MCO Provider Org.	Must enter either Provider Organization Name or ID to identify an existing MCO Provider Organization.
Provider Organization ID	Yes		There must be an existing MCO Provider Org.	Must enter either Provider Organization Name or ID to identify an existing MCO Provider Organization.
Provider Last Name	Yes		There must be an existing MCO Provider.	Must enter either MCO Provider Last Name or ID to identify an existing MCO provider.
MCO Provider ID	Yes		There must be an existing MCO Provider.	Must enter either MCO Provider Last Name or ID to identify an existing MCO provider.
Area of Expertise	Yes	Option List		The drop-down list values pull from the 274 Area of Expertise Option List.
Practice Focus	Yes	Option List		The drop-down list values pull from the 274 Practice Focus Option List.
Service Type	Yes	Option List		The drop-down list values pull from the 274 Service Type Option List.
Profit Status	Yes	Option List		The drop-down list values pull from the 274 Profit Status Option List.
NOTE The entry of the following five fields related to Professional Affiliation information are optional. Multiple records may be entered. If Professional Affiliation is entered, then Affiliated NPI 1 and Begin Date are required. Affiliated NPI 2 is optional.				
Professional Affiliation	No	Option List		The drop-down list values pull from the 274 Professional Affiliation Option List.
Affiliated NPI 1	Situationally		Standard NPI validation	
Affiliated NPI 2	No		Standard NPI validation	

Begin	Situationally	Date		**NOTE** Professional Affiliation data is only submitted if the Begin/End period overlaps with the 274 submission month/year.
End	No	Date		**NOTE** Professional Affiliation data is only submitted if the Begin/End period overlaps with the 274 submission month/year.

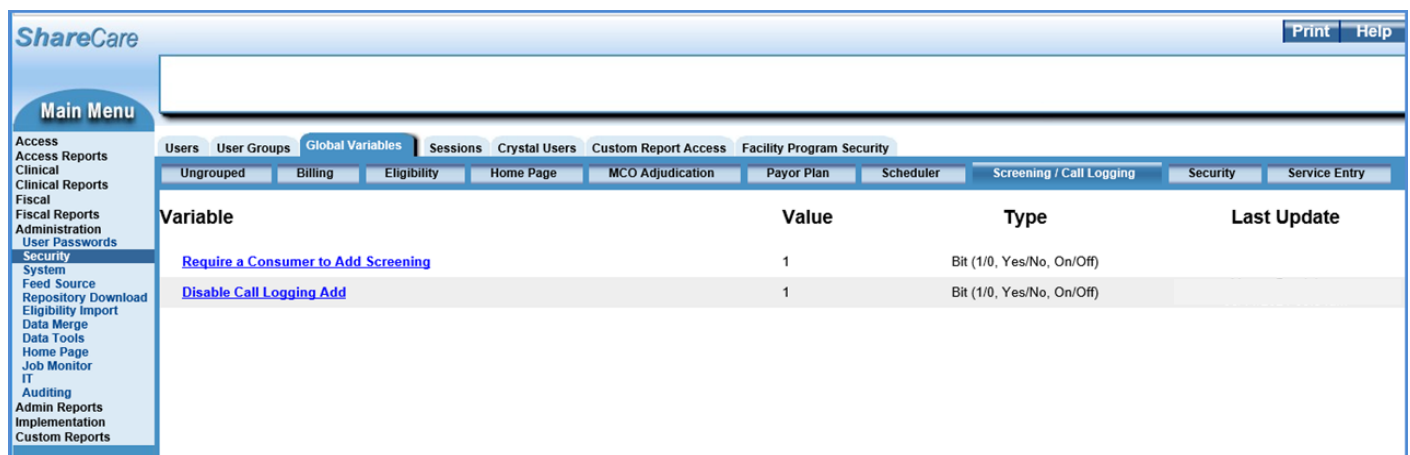
IMPROVEMENTS

Medi-Cal Reconciliation Screen, SC-1339

Updates were made to the display of 837 and 835 information on the Medi-Cal Reconciliation to make working on this screen easier. The 837 now shows the *Bill Print ID*, and the 835 now shows the *Warrant Number*.

New Global Variables to Control Adding Screening and Call Logging, SC-1382 (CC, 2990)

As a follow-up of SOW-24: Screening Enhancement for CSI Assessment for ContraCosta (see release notes for ShareCare 9.0.0). There are now 2 Global Variables in *Administration > Security > Global Variables > Screening/Call Logging*.



Variable	Value	Type	Last Update
Require a Consumer to Add Screening	1	Bit (1/0, Yes/No, On/Off)	
Disable Call Logging Add	1	Bit (1/0, Yes/No, On/Off)	

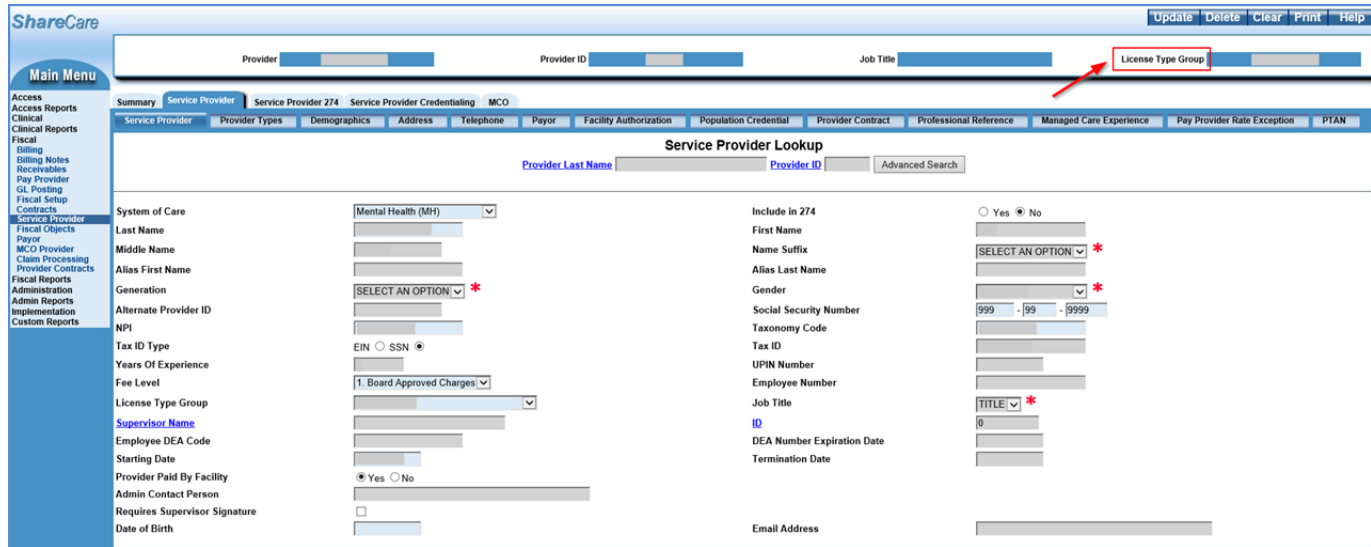
- **Require a Consumer to Add Screening** - If set to "1", a new Screening record can only be entered if an existing consumer has already been selected. Must be set to "1" for ContraCosta and to "0" for all other counties.
- **Disable Call Logging Add** - If set to "1", the "New" button on the *Access > Call Logging > Call Logging* screen is not available, and a new Call Logging record cannot be created. Must be set to "1" for ContraCosta and to "0" for all other counties.

BUG FIXES

Inaccurate Labels for License Type/License Type Group, SC-1240 (CC, 1305)

Labels for License Type and License Type Group were updated to correct some inaccuracies. The list below identifies the screens and labels changed with a sample image for each.

- In *Fiscal > Service Provider > Service Provider* – The label on the right was changed from "License Type" to "License Type Group" to be consistent with the label "License Type Group" on the left-hand side of that same screen.



ShareCare

Update Delete Clear Print Help

Provider [] Provider ID [] Job Title [] License Type Group []

Main Menu

Summary Service Provider Service Provider 274 Service Provider Credentialing MCO

Service Provider Provider Types Demographics Address Telephone Payor Facility Authorization Population Credential Provider Contract Professional Reference Managed Care Experience Pay Provider Rate Exception PTAN

Service Provider Lookup

Provider Last Name [] Provider ID [] Advanced Search

System of Care: Mental Health (MH) [v]

Last Name [] Middle Name [] Alias First Name [] Generation: SELECT AN OPTION [v] *

Alternate Provider ID [] NPI [] Tax ID Type: EIN [] SSN [] Years Of Experience [] Fee Level: 1 Board Approved Charges [v]

License Type Group [] Supervisor Name [] Employee DEA Code [] Starting Date [] Provider Paid By Facility: Yes [] No [] Admin Contact Person [] Requires Supervisor Signature [] Date of Birth []

Include in 274: Yes [] No []

First Name [] Name Suffix: SELECT AN OPTION [v] *

Alias Last Name [] Gender: [v] *

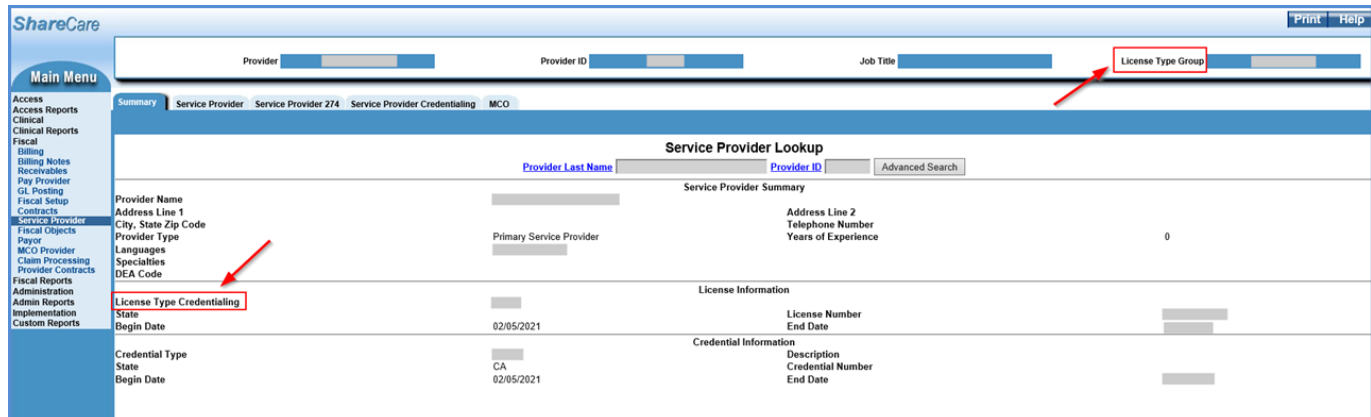
Social Security Number: 999 - 99 - 9999

Taxonomy Code [] Tax ID [] UPIN Number [] Employee Number [] Job Title: TITLE [v] *

ID [] DEA Number Expiration Date [] Termination Date []

Email Address []

- In *Fiscal > Service Provider > Summary* – The label on the right was changed from "License Type" to "License Type Group," and the label on the left was changed from "License Type" to "License Type Credentialing (to be consistent with the *Service Provider Credentialing* tab).



ShareCare

Print Help

Provider [] Provider ID [] Job Title [] License Type Group []

Main Menu

Summary Service Provider Service Provider 274 Service Provider Credentialing MCO

Service Provider Lookup

Provider Last Name [] Provider ID [] Advanced Search

Service Provider Summary

Provider Name [] Address Line 1 [] Address Line 2 [] City, State Zip Code [] Telephone Number [] Years of Experience [] 0

Provider Type: Primary Service Provider

Languages [] Specialties [] DEA Code []

License Type Credentialing [] License Information

State [] License Number [] End Date []

Begin Date: 02/05/2021

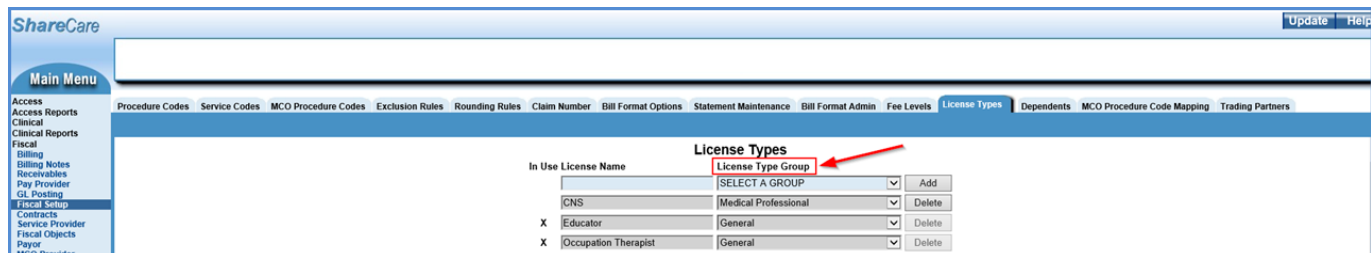
Credential Information

State: CA

Begin Date: 02/05/2021

Description [] Credential Number [] End Date []

- In *Fiscal > Fiscal Setup > License Types* – The label on top of the column on the right was changed from "License Group" to "License Type Group."



ShareCare

Update Help

Procedure Codes Service Codes MCO Procedure Codes Exclusion Rules Rounding Rules Claim Number Bill Format Options Statement Maintenance Bill Format Admin Fee Levels License Types Dependents MCO Procedure Code Mapping Trading Partners

License Types

In Use License Name License Type Group []

In Use License Name	License Type Group	Action
	SELECT A GROUP [v]	Add
CNS	Medical Professional [v]	Delete
X Educator	General [v]	Delete
X Occupation Therapist	General [v]	Delete

Diagnosis By Admission Required Message Showing Even When Present, SC-1342 (CC, 2853)

On the Information Flag in the *Clinical > Admissions > Diagnosis* tab, Edit/View, changing any of the fields created a message: "ShareCare cannot continue because of the following error(s). Please correct and try again. Diagnosis by is a required field. "

This issue has been resolved, and any of these fields can now be updated.

APPENDIX A – NEW 274 SUBMISSION OPTION LISTS

#1 Ownership Code (Code and Description)

- 01 Voluntary – Non-Profit – Religious Organizations
- 02 Voluntary – Non-Profit – Other
- 03 Voluntary – multiple owners
- 04 Proprietary – Individual
- 05 Proprietary – Corporation
- 06 Proprietary – Partnership
- 07 Proprietary – Other
- 08 Proprietary – multiple owners
- 09 Government – Federal
- 10 Government – State
- 11 Government – City
- 12 Government – County
- 13 Government – City-County
- 14 Government – Hospital District
- 15 Government – State and City/County
- 16 Government – other multiple owners
- 17 Voluntary /Proprietary
- 18 Proprietary/Government
- 19 Voluntary/Government
- 88 N/A – The individual only practices as part of a group, e.g., as an employee

#2 HIPAA 274 Facility Type

- 10 Individuals or Groups (of Individuals)
- 17 Non-Individual - Other Service Providers
- 25 Non-Individual – Agencies
- 26 Non-Individual - Ambulatory Health Care Facilities
- 27 Non-Individual - Hospital Units
- 28 Non-Individual – Hospitals
- 29 Non-Individual – Laboratories
- 31 Non-Individual - Nursing & Custodial Care Facilities
- 32 Non-Individual - Residential Treatment Facilities
- 33 Non-Individual – Suppliers
- 34 Non-Individual - Transportation Services
- 38 Non-Individual - Respite Care Facility
- SF Satellite Site – Fixed
- SM Mobile Medical Units

#3 HIPAA 274 Institutional Type

- 11 Hospital Inpatient (Including Medicare Part A)
- 12 Hospital Inpatient (Medicare Part B only)
- 13 Hospital Outpatient
- 14 Hospital Laboratory Services Provided to Non-patients
- 18 Hospital Swing Beds
- 21 SNF Inpatient (Including Medicare Part A)
- 22 SNF Inpatient (Medicare Part B only)
- 23 SNF Outpatient
- 28 SNF Swing Beds
- 32 Home Health-Inpatient (Plan of treatment under Part B only)

33 Home Health-Outpatient (Plan of treatment under Part A, including DME under Part A)
 34 Home Health-Other (for medical and surgical services not under a plan of treatment)
 41 Religious Nonmedical Health Care Institutions-Hospital Inpatient
 43 Religious Nonmedical Health Care Institutions-Outpatient Services
 65 Intermediate Care - Level I 66 Intermediate Care - Level II
 70 Clinic - Indian Health Services Facility
 71 Clinic - Rural Health
 72 Clinic - Hospital Based or Independent
 73 Clinic - Free Standing
 74 Clinic - Outpatient Rehabilitation Facility
 75 Clinic - Comprehensive Outpatient Rehabilitation
 76 Clinic - Community Mental Health Center
 77 Clinic - Federally Qualified Health Center (FQHC)
 78 Licensed Freestanding Emergency Medical Facility
 79 Clinic – Other
 81 Hospice (non-hospital based)
 82 Hospice (hospital based)
 83 Ambulatory Surgery Center
 84 Free Standing Birthing Center
 85 Critical Access Hospital
 86 Residential Facility
 89 Special Facility - Other

#4 Assistive Aid Indicator 1 and 2

1R – This location is handicapped accessible (ADA Compliant)
 1Y – This location has Telecommunication Device for the Deaf (TDD) equipment

#5 Assistive Transportation

1S – This location is less than 1 block from public transportation (less than 0.25 miles)
 1T – This location is less than 5 block from public transportation (between 0.25 and 0.5 miles)
 1U – This location is less than 1 mile from public transportation (Between 0.5 and 1.0 miles)
 1V – This location is 1 or more miles from public transportation

#6 Calendar Code

1 - 1st Week of the Month
 2 - 2nd Week of the Month
 3 - 3rd Week of the Month
 4 - 4th Week of the Month
 5 - 5th Week of the Month
 6 - 1st & 3rd Weeks of the Month
 7 - 2nd & 4th Weeks of the Month
 8 - 1st Working Day of Period
 9 - Last Working Day of Period
 A - Monday through Friday
 B - Monday through Saturday
 C - Monday through Sunday
 D - Monday
 E - Tuesday
 F - Wednesday
 G - Thursday
 H - Friday
 J - Saturday
 K - Sunday

L - Monday through Thursday
M - Immediately
N - As Directed
O - Daily Mon. through Fri.
P - 1/2 Mon. & 1/2 Thurs.
Q - 1/2 Tues. & 1/2 Thurs.
R - 1/2 Wed. & 1/2 Fri.
S - Once Anytime Mon. through Fri.
SA - Sunday, Monday, Thursday, Friday, Saturday
SB - Tuesday through Saturday
SC - Sunday, Wednesday, Thursday, Friday, Saturday
SD - Monday, Wednesday, Thursday, Friday, Saturday
SG - Tuesday through Friday
SL - Monday, Tuesday and Thursday
SP - Monday, Tuesday and Friday
SX - Wednesday and Thursday
SY - Monday, Wednesday and Thursday
SZ - Tuesday, Thursday and Friday
T - 1/2 Tue. & 1/2 Fri.
U - 1/2 Mon. & 1/2 Wed.
V - 1/3 Mon., 1/3 Wed., 1/3 Fri.
W - Whenever Necessary
WE - Weekend
X - 1/2 By Wed., Bal. By Fri.
Y - None (Also Used to Cancel or Override a PreviousPattern)

#7 Type of Board Certification

1 - State, county, or municipality professional or business license
2 - DEA license
3 - Professional society accreditation
4 - CLIA accreditation
5 - Other

#8 Area of Expertise

C – Child/Adolescent
A – Adult
G – Geriatric
S – Substance Abuse

#9 Practice Focus

1D - Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence
CD - Delirium, Dementia, and Amnesic and other Cognitive Disorders
GM - Mental Disorders Due to a General Medical Condition Not Elsewhere Categorized
SR - Substance-Related Disorders
PS - Schizophrenia and Other Psychotic Disorders
DS - Depressive Disorders
BP - Bi-polar Disorders
MD - Mood Disorders
AD - Anxiety Disorders
SD - Somatoform Disorders

FD - Factitious Disorders
 DD - Dissociative Disorders
 SG - Sexual and Gender Identity Disorders
 ED - Eating Disorders
 SL - Sleep Disorders
 IC - Impulse-Control Disorders Not Otherwise Elsewhere Categorized
 PD - Adjustment Disorders AJ Personality Disorders PD

#10 Service Type

MH - Mental Health Services
 CM - Case Management
 TC - Targeted Case Management
 CI - Crisis Intervention
 MS - Medication Support
 IC - Intensive Care Coordination
 IH - Intensive Home Based Services
 SR - Short Term Residential Therapeutic Programs

#11 Profit Status

01 - 501(C)(3) Non-profit
 02 - For profit – closely held
 03 - For profit, publicly traded
 04 - Other
 88 - Not applicable – the individual only practices as part of a group
 99 – Unknown

#12 Professional Affiliation

CLNC - Clinic
 HOSP - Hospital
 GROUP - Provider Organization or Provider Group
 PROF - Professional such as a Physician, Psychiatrist, Psychologist, etc.

#13 Gender

F - Female
 M - Male
 MTF - Transgender Male To Female
 FTM - Transgender Female To Male
 GQ - Genderqueer
 AG - Another Gender Identity
 U – Undisclosed

#14 Credential Type

MFT - Marriage and Family Therapist/Licensed Marriage and Family Therapist
 CSW - Master of Social Work/Licensed Clinical Social Worker
 NRS - Nurse - RN, LPN, NA
 NPA - Nurse Practitioner/ Advanced/Masters RN
 PCC - Professional Clinical Counselor (LPCC)
 PSY - Psychologist - PHD-Level

SUD - Substance Abuse Professional - All Levels

MD - Physician

BCB - Board Certified Behavior Analyst (BCBA) or Board Certified Associate Behavior Analyst (BCaBA)

LPS - Licensed Psychiatrists

CNS - Certified Nurse Specialists

LVN - Licensed Vocational Nurses

PTE - Psychiatric Technicians

MHR - Mental Health Rehabilitation Specialists

PAS - Physician Assistants

PHA - Pharmacists

OCT - Occupational Therapists

ACS - Associate Clinical Social Worker

AMF - Associate Marriage Family Therapist

APC - Associate Professional Clinical Counselor

WAP - Waivered Psychologist

OTH - Other Qualified Provider

#15 Speaking Proficiency

A – Excellent or Fluent

B – Good

C – Fair

D – Poor

#16 Telehealth Indicator

O – Services at this site are only provided through telehealth

B – Services at this site are provided both in-person and through telehealth

N - No provider uses telehealth at this site